Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: OPTOELECTRONIC COMPONENT

Attorney Docket Number:: 3501-1082

Request for Early No

Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 5

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FINLAND

Status:: Full Capacity

Given Name:: MARKUS

Middle Name::

Family Name:: TUOMIKOSKI

City of Residence:: OULU

State or Province of

Residence::

Country of Residence:: FINLAND

Street of Mailing UUSIKATU 57 A 303

Address::

City of Mailing Address:: OULU

State or Province of Mailing Address::

Country of Mailing Address:: FINLAND

Postal or Zip Code of Mailing Address:: FIN-90120

Applicant Authority Type:: Inventor

Primary Citizenship Country:: LEBANON

Status:: Full Capacity

Given Name:: GHASSAN

Middle Name:: E.

Family Name:: JABBOUR

City of Residence:: TUCSON

State or Province of ARIZONA

Residence::

Country of Residence:: UNITED STATES OF AMERICA

Street of Mailing 2820 E. 6TH STREET #116

Address::

City of Mailing Address:: TUCSON

State or Province of Mailing Address:: ARIZONA

Country of Mailing Address:: UNITED STATES OF AMERICA

Postal or Zip Co	de of Mailing Ado	dress:: 85716	
Correspondence Information			
Correspondence C	ustomer	000466	
Number::			
Representative Information			
Representative Customer		000466	
Number::			
Domestic Priority Information			
Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
	<u> </u>		<u> </u>
Foreign Priority Information			
Country::	Application	Filing Date::	Priority
	Number::		Claimed::
Assignment Information			
Assignee Name::			
Street of Mailing Address:			
City of Mailing Address::			
State or Province of Mailing Address::			
Country of Mailing Address::			
Postal or Zip Code of Mailing Address::			